



Maryland Home Performance Rebate Completion Certificate

A. Applicant Information – All information below is required.

Completed by Homeowner

Name: _____

Installation Address: _____

City: _____ Zip+4: _____

County: _____

Legal Address, if different from above (including Zip Code+4):

Phone: _____ Email: _____

Electric Utility Company: _____ Utility Account Number: _____

Recipient's Congressional District: MD _____ Recipient's Legislative District: MD _____

Find your congressional and legislative district at: <http://mdelect.net/electedofficials/>

Rebate Amount Requested: _____

B. Installation Contractor Information

Sections B and C should be filled out by the installation contractor.

Installation Contractor Name: _____

Company Name: _____

Contractor's Maryland License #: _____ Type of License: _____

www.mdhomeperformance.org

Form version: 2/4/2011

Company's Mailing Address:

City: _____ State: _____ Zip+4: _____

Phone: _____ Fax: _____ Contractor's Email: _____

Contractor DUNS # (request a DUNS at <http://fedgov.dnb.com/webform>): _____

Project Start Date: _____ Project Completion Date: _____

Jobs Created (FTE hours)*: _____ Jobs Retained (FTE hours)*: _____

*To calculate jobs create/retained, please see:

<http://www.energy.state.md.us/documents/GuidelinesonReportingJobsCreatedorRetained.pdf>

C. Contractor Acknowledgement:

I solemnly affirm under penalties of perjury that I am a contractor licensed in Maryland, and have met the requirements of the local codes authority regarding system safety and reliability and that all the contents of the foregoing completion certificate are true to the best of my knowledge, information, and belief. I am a participating contractor in good standing with the Maryland Home Performance with ENERGY STAR program.

Signed (Installation Contractor):

Date:

Name (Print):

Company:

D. Homeowner Acknowledgement:

I solemnly affirm under penalties of perjury that I am a Maryland homeowner, I reside in the property, and have met the requirements of the program as described in the Maryland Home Performance Rebate Terms and Conditions, including the ARRA Addendum Special Terms and Conditions for Home Performance Rebate Program (January 2011), and that the contents of the foregoing completion certificate are true to the best of my knowledge, information, and belief.

Signed (Owner):

Date:

Name (Print):

Submit the following:

- ☐ Signed Completion Certificate (this form)
- ☐ Copy of paid sales invoice, which includes:
 - ☐ Itemized list of measures, including the actual price paid for each measure
 - ☐ Date of final payment
- ☐ Test-out form from contractor

To:

SRA, Inc.

Attention: Maryland Home Performance Rebates

7475 Wisconsin Avenue Suite 900

Bethesda, MD 20814

You will receive your rebate check in 6-8 weeks after ALL documentation is received.
Inaccurate or incomplete documentation will result in delays.

For more information:

Email mdhomeperformance@sra.com; include "Rebate Program" in the subject line.